

## PROGRAM OVERVIEW



You can obtain covered “maintenance” medications used to treat chronic or long term health conditions such as high blood pressure, diabetes, cholesterol, thyroid, and menopause.

If you are about to try a medication prescribed by your physician for the first time, it’s a good idea to have it filled at a retail pharmacy **before** using the mail order service. There are several reasons for this:

- If for some reason you cannot safely tolerate the medication, you will have only purchased a 30-day supply.
- Should the medication prescribed require pre-authorization, this gives your physician time to process the necessary paperwork with the Plan. It also ensures that pertinent information about your medication has been transmitted to appropriate parties in advance of your mail order submission.
- Receiving a new prescription through a retail pharmacy beforehand allows you to know what copayment you will be paying for that medication. When you use mail order, generally your cost will be two times that copayment for your 90-day supply.

## ADVANTAGES OF ORDERING PRESCRIPTIONS BY MAIL

**Cost effective** – When you order a 90-day medication supply by mail, you save money by paying less than you would at a retail pharmacy.

**Convenient** – Maintenance medications are delivered to your home.

**Safe** – All prescriptions are reviewed by a registered pharmacist before they are mailed. This helps ensure accuracy and proper dosage.

**Fast** – New prescriptions can be faxed directly from your provider’s office to Walgreens Healthcare Plus.

## GENERIC SUBSTITUTION

It is standard pharmacy practice and required by law to substitute generic equivalents for brand drugs whenever possible.



## YOUR COST

When you have your covered prescriptions filled through the Walgreens Healthcare Plus mail service pharmacy, generally, a 90-day supply is available for two retail copayments. For specific copayment information, please refer to your member materials.

**Note:** If a generic drug is available, the generic drug will always be dispensed, except when a physician orders a brand name drug. If you or your physician requests a brand name drug when a generic equivalent is available, you are responsible for paying the difference in the allowable charge between the generic and the brand name drug, in addition to your second or third tier copayment.



## IMPORTANT—PLEASE NOTE

Your prescriptions may be filled for up to a 90-day supply when allowed by your physician, the law, and in accordance with pharmacy practice. Some medications that may only be dispensed for the exact quantity as written by your physicians include controlled substances and antidepressants.

## COVERED DRUGS



The following items are covered under the program (unless specified under “Drugs Not Covered”):

- Federal legend drugs (that is, drugs that federal law prohibits dispensing without a prescription)
- Compound prescriptions containing at least one legend ingredient
- Insulin
- Disposable insulin syringes/needles

## DRUGS NOT COVERED

*Prescriptions submitted for items not covered will be returned to you unfilled.* The following items are not covered under the program (unless specified under “Covered Drugs”):

- Anti-obesity (weight reduction)
- Fertility drugs
- Hair loss treatments (i.e., Minoxidil, Propecia)
- Non-insulin injectables
- Over-the-counter (OTC) items
- Retin-A (for anyone over age 29)
- Smoking cessation drugs

(See back: “Using the Mail Service Pharmacy” ➡)

## USING THE MAIL SERVICE PHARMACY

**For new and refill orders by mail:** Always fully complete the supplied order form (included with each delivery). Enclose the form with your new written prescription(s) and/or eligible Refill Request(s) sent with previous orders. *New prescriptions may not be phoned in by you or your doctor.* (You may, however, order **refills by phone**; see below.)

**To avoid delays:** Always include the appropriate copayment by check or credit card at the time your order is placed. *Failure to provide payment may result in the return of your unfilled orders.*

**For your first order:** Be sure to use the special REGISTRATION & PRESCRIPTION ORDER FORM attached to this brochure to register yourself and your dependents and place your first order. This form provides important health, allergy and plan ID information for you and your dependents.

**For refills from other pharmacies:** Walgreens Healthcare Plus must have a *written* prescription on file to process your mail service order. If you wish to use the mail service, please ask your doctor for a new written prescription.

**Refills by phone (with credit card):** Call the convenient touch-tone refill service toll-free: **1-800-749-0009**, 24 hours a day, 7 days a week. Have your prescription number(s) and credit card ready (en español: 1-800-758-0002).

**Refills by internet (with credit card):** Visit our website at: [www.whphi.com](http://www.whphi.com) and select "Mail Service Ordering." Have your prescription number(s), zip code, and store number (located on your vial) ready.

**Refills too soon:** Each bar-coded "Refill Request" shows the date on or after which you can order that refill. Orders placed more than two weeks before the refill date may be returned unfilled with a request to resubmit them at a later date.

**Prescription expiration date:** Most prescriptions, including refills, expire one year (sometimes sooner) from the date they are written. After the expiration date, *regardless of whether your vial label still shows refills remaining*, you must obtain a new prescription from your doctor.

(continued ➡)

**Prescription delivery:** Please allow two weeks for delivery from the date you mail your order.

This allows time for delivery to and from the mail service pharmacy, plus internal processing time. Most prescriptions are delivered by U.S. Postal Service. We recommend that you keep a two-week supply of medications on hand to allow for unforeseen shipping delays.

**In case of emergency:** Prescriptions can be shipped overnight for an additional charge to you.

**For maintenance drugs you need to start taking right away:** Ask your physician for two prescriptions. The first one can be filled for a month's supply at a local pharmacy. The additional 90-day supply prescription can be sent to Walgreens Healthcare Plus for processing.

**Customer Service:** Call **1-800-999-2655** (TTY for deaf: 1-800-925-0178) Hours are 8 a.m.–8 p.m. (Eastern) Monday–Friday and Saturday 8 a.m.–Noon.

**Pharmacist Assistance:** You may speak directly to a pharmacist by calling the number above.

**Other Questions:** Please contact your health plan's Member Services Department at the number on your ID card with specific benefit questions.

**Make checks payable to:** Walgreens Healthcare Plus. **Please do not send cash.**

**Credit cards accepted:** Visa, MasterCard, American Express, Discover.

**Mail your order to:**  
**Walgreens Healthcare Plus**  
**7357 Greenbriar Parkway**  
**Orlando, FL 32819-8917**

**CONVENIENT REFILLS (WITH CREDIT CARD)**  
**24 HOURS A DAY • 7 DAYS A WEEK**

**BY PHONE**  
**1-800-749-0009** (en español: 1-800-758-0002)  
**ON-LINE VIA THE INTERNET**  
**[www.whphi.com](http://www.whphi.com)**

*This brochure only highlights your mail service pharmacy benefit. In case of any discrepancy between this brochure and the legal documents describing the plan, the legal documents govern.*

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**Walgreens**  
**Healthcare Plus**

## Prescription Drug Program

### Mail Service Pharmacy Benefit

